IOWA DEPARTMENT OF HUMAN SERVICES MEDICALD MANAGEMENT INFORMATION SYSTEM

PAGE 1 RUN DATE 08/26/18

TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) (FISCAL YTD TOTALS AS OF 08/31/18)

CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
INPATIENT	2,815	2,850	17,081	\$28,170,146.03
OUTPATIENT	16,254	27,338	2,408,526	\$7,322,491.41
CHILD PART HOSP	. 0	Ó	0	\$0.00
CHILD DAY TREATMENT	0	0	0	\$0.00
ADULT PART HOSP	0	0	0	\$0.00
ADULT DAY TREATMENT	0	0	0	\$0.00
SKILLED NURSING FACILITY	220	365	3,408	\$377,769.55
IHAWP IOWA PLAN LITE	0	0	0	\$0.00
IHAWP IOWA PLAN FULL	0	0	0	\$0.00
IHAWP HMO	9	0	0	\$0.00
IHAWP PCP	9	0	0	\$0.00
INTERMEDIATE CARE FACILITY	1.095	1,804	49,871	\$10,629,377.13
INTER CARE MENTAL RETARDA	39	92	2,417	\$985,764.07
NURSING FAC FOR MENTAL ILL	4	3	82	\$9,782.47
HOME HEALTH	1,578	2,811	454,980	\$4,625,017.91
LEAD INSPECTION AGENCY	0	0	0	\$0.00
PHYSICIAN	22,419	62,499	138,713	\$3,899,880.01
CLINIC SERVICES	5,565	8,717	8,340	\$5,785,260.75
MED CASE MANAGEMENT	0,000	0	0	\$0.00
EHR INCENTIVE PAYMENTS	1	0	o o	\$214,143.90
LAB AND RADIOLOGICAL	2,871	4,596	11,036	\$185,435.02
HABILITATION SERVICES	164	1,752	7,916	\$539,909.72
BEHAVIORAL HLTH INTERVENTN SVC	226	1,238	13,695	\$310,021.47
REHAB SUPPORT SERVICES	4	11	55	\$2,925.67
AMBULANCE SERVICES	1,177	1,614	1,600	\$190,767.40
LOCAL EDUCATION AGENCY	1,668	45,526	527,007	\$7,074,506.31
INFANT TODDLER	109	220	521	\$5,871.72
INFANT TODDLER IHAWP WELLNESS EXAM BONUS	0	0	0	\$0.00 \$0.00
ACO VIS PAYMENTS	0	Ö	o o	\$0.00
PRESCRIBED DRUGS	14,438	57,836	42,970	\$2,447,385.86
IOWA-PLAN-PMIC	0	0	42,570	\$0.00
DRUG CAPITATION	0	0	0	\$0.00 \$0.00
NEMT SERVICES	21,081	32,470	32,468	\$0.00 \$78,247.75
INDIAN HEALTH SERVICES	21,001	32,470	32,460	\$70,247.75 \$0.00
FAMILY PLANNING SERVICES	417	597	600	\$34,805.67
IOWA CARE MED HOME CAPITATION	41,	0	0	\$0.00
IOWA CARE HED HOME CAPITATION	0	0	o o	\$0.00
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00 \$0.00
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00
RENIAL HEALTH ACCESS PLAN EPSDT SCREENING	6,726	7,039	7,032	\$0.00 \$943,398.02
HMO SERVICES	0,726	7,039	7,032	•
PACE SERVICES	493	946	945	\$0.00
PACE SERVICES PATIENT MANAGEMENT	4.53	0	0	\$3,551,075.87 \$0.00
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HEALTH INS PREMIUM PAYMENT	2,723	12,759	12,759	\$1,188,333.05
MEDICAL SUPPLIES	3,180	6,961	303,344	\$574,482.27
HEALTH HOME PROVIDER	554	971	967	\$130,177.76
TCM PAYMENTS TO IOWAPLAN	0	0	0	\$0.00
IHAWP QHP	0	0	0	\$0.00
MCO	743,295	1,139,089	1,135,974	\$828,721,687.47
OTHER PRACTITIONER	7,912	24,383	72,866	\$3,231,015.84

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CATEGORY OF SERVICE	RECIPIENTS SERVED	NUMBER OF CLAIMS	UNITS OF SERVICE	TOTAL PAYMENT
FAMILY CENTERED PROGRAM	0	0	0	\$0.00
FAMILY PRESERVATION	0	0	0	\$0.00
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00
GROUP TREATMENT THERAPY	0	0	0	\$0.00
DENTAL	45,257	55,579	55,642	\$8,094,306.45
ACCOUNTABLE CARE ORGANIZATIONS	0	0	0	\$0.00
OPTOMETRIST	1,448	1,679	1,863	\$105,504.34
CHIROPRACTIC	853	2,050	2,477	\$46,082.34
IOWA-PLAN-HAB	0	0	0	\$0.00
PODIATRIC	566	792	1,189	\$36,763.73
DELTA DENTAL	315,862	617,199	616,936	\$10,474,294.90
PHYSICAL DISABILITIES SVCS	11	25	5,725	\$17,888.88
BRAIN INJ WAIVER SERVICES	169	618	33,850	\$607,868.61
PSYCHIATRIC	2,259	4,590	5,552	\$333,973.57
RESIDENTIAL CARE FACILITY	599	1,208	34,435	\$272,560.36
ID WAIVER SERVICE	865	2,893	212,940	\$3,707,584.31
CHILDRENS MENTAL HEALTH SVC	62	186	35,805	\$136,688.05
AIDS WAIVER SERVICES	0	0	0	\$0.00
ELDERLY WAIVER SERVICES	455	994	27,254	\$450,978.21
ILL & HANDICAPPED WAIVER SVCS	393	845	66,069	\$1,047,998.59
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00
MEP SERVICES	921	1,889	12,782	\$836,050.76
UNASSIGNED	1	0	0	\$213,549.45-
* ALL CATEGORIES *	768,386	2,135,034 *** END OF REPORT	6,367,692 ***	\$937,184,673.75